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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF PENNSYLVANIA	=	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Charles First name A. Middle name Shoop, Jr. Last name and Suffix (Sr., Jr., II, III)	Anne First name L. Middle name Shoop Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2664	xxx-xx-8710

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Debtor 1 Charles A. Shoop, Jr.
Debtor 2 Anne L. Shoop

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	120 Neshannock Trails New Castle, PA 16105	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Lawrence				
		County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Del	otor 2 Anne L. Shoop			Case number (if known)	
Dor	Toll the Court About)	Varia Bankarintari Ci			
7.	The chapter of the	Check one. (For a l	orief description of each, see Notice Req	uired by 11 U.S.C. § 342(b) for Individuals Filin	g for Bankruptcy
	Bankruptcy Code you are choosing to file under		go to the top of page 1 and check the a	opropriate box.	
	-	Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		☐ Chapter 13			
8.	How you will pay the fee	about how you order. If your a pre-printed	ou may pay. Typically, if you are paying to attorney is submitting your payment on yaddress.	ase check with the clerk's office in your local come fee yourself, you may pay with cash, cashie your behalf, your attorney may pay with a credit this option, sign and attach the Application for	r's check, or money t card or check with
		The Filing Fe ☐ I request the but is not rec applies to yo	ee in Installments (Official Form 103A). at my fee be waived (You may request to the properties of th	his option only if you are filing for Chapter 7. By only if your income is less than 150% of the off the fee in installments). If you choose this option (Official Form 103B) and file it with your perform the fee in installments).	y law, a judge may, icial poverty line that on, you must fill out
9.	Have you filed for	■ No.			
	bankruptcy within the last 8 years?	☐ Yes.			
	lact o youro!	District	When	Case number	
		District	When	Case number	
		District	When	Case number	
10.	Are any bankruptcy	■ No			
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor		Relationship to you	
		District	When	Case number, if known	
		Debtor		Relationship to you	
		District	When	Case number, if known	
11.	Do you rent your	■ No. Go to	ine 12.		
	residence?		our landlord obtained an eviction judgmen	nt against you?	
			No. Go to line 12.		
			Yes. Fill out <i>Initial Statement About an</i> this bankruptcy petition.	Eviction Judgment Against You (Form 101A) ar	nd file it as part of

Charles A. Shoop, Jr.

Debtor 1

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Charles A. Shoop, Jr.

	otor 1 Charles A. Shoop, otor 2 Anne L. Shoop	Jr.	2000	Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Prop	rietor			
12. Are you a sole proprietor of any full- or part-time business? Go to Part 4. business?							
		☐ Yes.	Yes. Name and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.							
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code			
	it to this petition.		Check the appropriate	box to describe your business:			
			☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	ove			
13.	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			are a small business debtor, you must attach your most recent balance sheet, statement of			
	For a definition of small	■ No.	I am not filing under C	hapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or	Any Property That Needs Immediate Attention			
14.		■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety?						
	Or do you own any		If immediate attention is				
	property that needs immediate attention?		If immediate attention is needed, why is it needed	?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code			
				Hambor, Street, Oity, State & Zip Sode			

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Debtor 1 Charles A. Shoop, Jr.
Debtor 2 Anne L. Shoop

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-21894-JAD Doc 1 Filed 05/08/19 Entered 05/08/19 14:27:58 Desc Main Document Page 6 of 53

	tor 1 tor 2	Charles A. Shoop, Anne L. Shoop	, Jr.	Doddinent	r age o o	Case number (i	f known)		
Part	t 6:	Answer These Questi	ons for Re	eporting Purposes					
	Wha	t kind of debts do nave?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
				□ No. Go to line 16b.					
				Yes. Go to line 17.					
			16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe th	at are not consun	ner debts or business o	debts		
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	after prop	ou estimate that any exempt erty is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	are p	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No					
	distr			☐ Yes					
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		□ 25,001-50,000		
	-		□ 50-99		□ 5001-10,000 □ 10,001-25,00		☐ 50,001-100,000 ☐ More than100,000		
			☐ 100-19 ☐ 200-9		山 10,001-25,00	JU	☐ More than 100,000		
19.		much do you nate your assets to	□ \$0 - \$5	•	□ \$1,000,001 -		□ \$500,000,001 - \$1 billion		
		orth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			\$500,001 - \$1 million		□ \$100,000,00		☐ More than \$50 billion		
20.		much do you nate your liabilities	□ \$0 - \$	•	□ \$1,000,001 -		□ \$500,000,001 - \$1 billion		
	to be	-	□ \$50,001 - \$100,000 ■ \$100,001 - \$500,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
				001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 million		☐ More than \$50 billion		
Part	t 7:	Sign Below							
For	you		I have ex	amined this petition, and I declare u	under penalty of p	erjury that the informat	tion provided is true and correct.		
				chosen to file under Chapter 7, I am ates Code. I understand the relief a			nder Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.		
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				n attorney to help me fill out this					
			I request	relief in accordance with the chapte	er of title 11, Unite	ed States Code, specific	ed in this petition.		
				cy case can result in fines up to \$25			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
				les A. Shoop, Jr. A. Shoop, Jr.		/s/ Anne L. Shoop Anne L. Shoop			
				e of Debtor 1		Signature of Debtor 2			
			Executed	on April 17, 2019		Executed on April	17, 2019		
				MM / DD / YYYY			DD/YYYY		

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Debtor 1 Debtor 2	Charles A. Shoop	, Jr. Document	9	ase number (if known)	
•	attorney, if you are ted by one	I, the attorney for the debtor(s) named in the under Chapter 7, 11, 12, or 13 of title 11, U for which the person is eligible. I also certi	nited States Code, and have	explained the relief a	vailable under each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) appl schedules filed with the petition is incorrect	ies, certify that I have no kno		
		/s/ Kenneth Steidl	Date	April 17, 2019	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Kenneth Steidl 34965			
		Printed name			
		Steidl & Steinberg			
		Firm name			
		28th Floor - Gulf Tower			
		707 Grant Street			
		Pittsburgh, PA 15219-1908			
		Number, Street, City, State & ZIP Code			

Email address

412-391-8000

Contact phone

34965 PA Bar number & State kenny.steinberg@steidl-steinberg.co

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		Docum	ent Page 8 of 53	
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles A. Shoop	o, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Anne L. Shoop			
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an amended filing
~~	4000			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	ssets of what you own
		value (or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	225,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	37,334.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	262,334.00
⊃aı	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	193,170.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	113,777.00
	Your total liabilities	\$	306,947.00
Pai	t 3: Summarize Your Income and Expenses		
1 .	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,053.00
	Copy your combined monthly income from line 12 of Schedule I	Ψ	-,
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,078.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
ŝ.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
	■ Yes		
7.	What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Charles A. Shoop,	Jr
Debtor 2	Anne I Shoon	

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,111.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	To	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 2	19-21894-J	IAD Doc 1			L9 Entered 05/0 Page 10 of 53	8/19 14:	27:58 I	Desc M	⁄lain
FIII	in this informa	ation to identify	your case and th			raue 10 01 33				
	otor 1	Charles A. S	Shoop, Jr.	Name		Last Name				
	otor 2 use, if filing)	Anne L. Sho		Name		Last Name				
Unit	ted States Bank	cruptcy Court for	the: WESTERN	DISTR	CICT OF PENNS	SYLVANIA				
Cas	se number									eck if this is an ended filing
_		m 106A/E A/B: Pi	_						12/1	5
n ea hink nfor Ansv	ch category, sep tit fits best. Be a mation. If more s ver every question	parately list and d as complete and space is needed, on.	escribe items. List a accurate as possibl attach a separate sl	e. If two neet to t	married people his form. On the	n asset fits in more than one are filing together, both are top of any additional pages n or Have an Interest In	equally resp	onsible for su	ipplying co	orrect
. Do	o vou own or hav	ve anv legal or eg	uitable interest in a	nv resid	lence. buildina. l	land, or similar property?				
	No. Go to Part 2	, ,	•	•	, 5,	, , , ,				
	Yes. Where is t									
1.1	400 No ok ove	adala Tasila		What	t is the property	? Check all that apply				
	120 Neshan Street address, if a	INICK I FAIIS available, or other des	scription		Duplex or multi-unit building the ar		the amoun	Do not deduct secured claims or exemption he amount of any secured claims on Scheo Creditors Who Have Claims Secured by Pro-		Schedule D:
	New Castle	PA	16105-0000			or mobile home	Current va			value of the you own?
	City	State	ZIP Code		Timeshare	perty	Describe t	25,000.00 he nature of y	our owner	\$225,000.00 ship interest e entireties, or
					Debtor 1 only	in the property? Check one	a life estat	e), if known. by the Ent		
	Lawrence				202101 2 0,					
	County					Debtor 2 only the debtors and another		c if this is com	nmunity pro	operty
				Othe		ou wish to add about this ite	,	,		
				*Fai	ir Market Valı	ue determined by curr	ent apprai	isal		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$225,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

		Document Page	11 of 53		
Debtor 1 Debtor 2	Charles A. Shoop, Jr. Anne L. Shoop		Case number	(if known)	
3. Cars, va	ns, trucks, tractors, sport utility ve	hicles, motorcycles			
□ No					
Yes					
3.1 Mak	e: Nissan	Who has an interest in the property			aims or exemptions. Put
Mod	el: Frontier	☐ Debtor 1 only	tne am		ed claims on Schedule D: ims Secured by Property.
Year	2015	Debtor 2 only	Curro	nt value of the	Current value of the
Appr	oximate mileage: 32,000	■ Debtor 1 and Debtor 2 only		property?	portion you own?
	r information:	☐ At least one of the debtors and and	other		
	ation: 120 Neshannock Is, New Castle PA 16105	Check if this is community proper (see instructions)	erty	\$26,325.00	\$26,325.00
.pages y	ou have attached for Part 2. Write scribe Your Personal and Household It			=>	\$26,325.00
·		terest in any of the following items	s?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No	old goods and furnishings es: Major appliances, furniture, linens Describe	s, china, kitchenware			
	Summary Avail	ld Goods & Furnishings able Upon Request Ieshannock Trails, New Castle	PA 16105		\$5,000.00
□ No		eo, stereo, and digital equipment; co nedia players, games	mputers, printers, scanner	s; music collecti	ons; electronic devices
	iPad Location: 120 N	leshannock Trails, New Castle	PA 16105		\$100.00
Exampl ■ No	bles of value es: Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictui	res, or other art objects; st	amp, coin, or ba	seball card collections;
9. Equipm Example	ent for sports and hobbies	nd other hobby equipment; bicycles, p	pool tables, golf clubs, skis	s; canoes and ka	ayaks; carpentry tools;

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Entered 05/08/19 14:27:58 Desc Main Case 19-21894-JAD Doc 1 Filed 05/08/19 Page 12 of 53 Document Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop Case number (if known) 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No Yes. Describe..... Two Shotguns, Three Hunting Rifles \$1,300.00 Location: 120 Neshannock Trails, New Castle PA 16105 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothing & Shoes \$1,000.00 Location: 120 Neshannock Trails, New Castle PA 16105 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ΠNο Yes. Describe..... Wedding Rings & Misc Jewelry Items \$2,500.00 Location: 120 Neshannock Trails, New Castle PA 16105 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$9.900.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

16. Cash

■ No

□ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Institution name: ■ Yes.....

> **First National Bank** \$1,109,00 17.1. Checking

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Debtor 1 Debtor 2	Charles A. Shoop, Jr. Anne L. Shoop	Document	Case number (if known)	
	s, mutual funds, or publicly traded stocl		ey market accounts	
■ No □ Yes	Institution or iss	suer name:		
		corporated and uninco	prporated businesses, including an interest in an LLC, pa	ırtnership, and
joint ■ No	venture			
☐ Yes	. Give specific information about them Name of entity:		% of ownership:	
Nego Non-i ■ No	rnment and corporate bonds and other i tiable instruments include personal checks negotiable instruments are those you canno	, cashiers' checks, pron	nissory notes, and money orders.	
☐ Yes	. Give specific information about them Issuer name:			
	ement or pension accounts aples: Interests in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings	s accounts, or other pension or profit-sharing plans	
	. List each account separately. Type of account:	Institution na	ame:	
Your <i>Exam</i>	rity deposits and prepayments share of all unused deposits you have mad aples: Agreements with landlords, prepaid r		inue service or use from a company stric, gas, water), telecommunications companies, or others	
■ No		Institution no	ame or individual:	
23. Annui ■ No	ities (A contract for a periodic payment of r	money to you, either for	life or for a number of years)	
☐ Yes	Issuer name and description	on.		
	sts in an education IRA, in an account in .C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE pro	gram, or under a qualified state tuition program.	
	Institution name and descr	iption. Separately file the	e records of any interests.11 U.S.C. § 521(c):	
25. Trust s ■ No	s, equitable or future interests in proper	ty (other than anything	g listed in line 1), and rights or powers exercisable for yo	our benefit
☐ Yes	. Give specific information about them			
	ts, copyrights, trademarks, trade secret apples: Internet domain names, websites, pro-			
	. Give specific information about them			
	ses, franchises, and other general intan nples: Building permits, exclusive licenses,	_	n holdings, liquor licenses, professional licenses	
	. Give specific information about them			
Money or	r property owed to you?		portion y Do not de	value of the rou own? educt secured exemptions.
28. Tax re ■ No	efunds owed to you		Claims of	exemplions.

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

	Case 19-2189	4JAD	Doc 1	Filed 05/08/	/19	Entered 05/08/19 14:27:	58 Desc Main
			2002	Document		ge 14 of 53	20 2000 mam
Debtor 1 Debtor 2	Charles A. Shoo Anne L. Shoop	op, Jr.				Case number (if known)
Exar ■ No	ly support mples: Past due or lum s. Give specific informa		ony, spousa	l support, child supp	oort, m	aintenance, divorce settlement, proper	ty settlement
Exar	r amounts someone on mples: Unpaid wages, benefits; unpaid s. Give specific inform	disability ins I loans you			nefits,	sick pay, vacation pay, workers' comp	ensation, Social Security
<i>Exar</i> □ No		/, or life ins		· ·	(HSA)	; credit, homeowner's, or renter's insura	ance
■ Yes	s. Name the insurance	company o Company		y and list its value.		Beneficiary:	Surrender or refund value:
		Term Li	fe Insuran	ce with No Cash	1	Anne Shoop	\$0.00
33. Clain Exar ■ No □ Yes 34. Other ■ No □ Yes 35. Any f	nples: Accidents, emples: Accidents, emples. s. Describe each claim	es, whether oyment disp n quidated con	putes, insura	ance claims, or righ	ts to si	made a demand for payment ue unterclaims of the debtor and rights	to set off claims
■ No □ Yes	s. Give specific inform	ation					
	l the dollar value of a Part 4. Write that nun					ntries for pages you have attached	\$1,109.00
Part 5:	Describe Any Business-F	Related Prop	erty You Ow	n or Have an Interest	In. Lis	st any real estate in Part 1.	
-	u own or have any legal	or equitable	interest in a	ny business-related	proper	ty?	
No. 0	Go to Part 6.						
☐ Yes.	Go to line 38.						
	Describe Any Farm- and f you own or have an inter				vn or H	lave an Interest In.	

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

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Debtor Debtor		Ü	Case number (if Imaum)	
Debioi	2 Anne L. Shoop		Case number (if known)	
	you have other property of any kind you did not already list? camples: Season tickets, country club membership			
■ N	lo			
ΠY	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P a	art 1: Total real estate, line 2			\$225,000.00
56. P a	art 2: Total vehicles, line 5	\$26,325.00	_	
57. P a	art 3: Total personal and household items, line 15	\$9,900.00		
58. P a	art 4: Total financial assets, line 36	\$1,109.00		
59. P a	art 5: Total business-related property, line 45	\$0.00		
60. P a	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P a	art 7: Total other property not listed, line 54	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$37,334.00	Copy personal property total	\$37,334.00
63. T o	otal of all property on Schedule A/B. Add line 55 + line 62			\$262 334 00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this inform	mation to identify your	case:		
Debtor 1	Charles A. Shoop	o, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Anne L. Shoop			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number _				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt	
---	--

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.		
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	120 Neshannick Trails New Castle,	\$225,000.00		\$50,300.00	11 U.S.C. § 522(d)(1)	
*	PA 16105 Lawrence County *Fair Market Value determined by current appraisal Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	120 Neshannick Trails New Castle, PA 16105 Lawrence County	\$225,000.00		\$241.00	11 U.S.C. § 522(d)(5)	
	*Fair Market Value determined by current appraisal Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	Basic Household Goods & Furnishings	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)	
	Summary Available Upon Request Location: 120 Neshannock Trails, New Castle PA 16105 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	iPad	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)	
	Location: 120 Neshannock Trails, New Castle PA 16105 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

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Charles A. Shoop, Jr.

De	ebtor 2 Anne L. Shoop			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Two Shotguns, Three Hunting Rifles Location: 120 Neshannock Trails,	\$1,300.00		\$1,300.00	11 U.S.C. § 522(d)(5)	
	New Castle PA 16105 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit		
	Clothing & Shoes Location: 120 Neshannock Trails,	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	
	New Castle PA 16105 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	Wedding Rings & Misc Jewelry Items Location: 120 Neshannock Trails,	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(4)	
	New Castle PA 16105 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		
	Checking: First National Bank Line from Schedule A/B: 17.1	\$1,109.00		\$1,109.00	11 U.S.C. § 522(d)(5)	
	Line nom Schedule Avb. 1711			100% of fair market value, up to any applicable statutory limit		
	Term Life Insurance with No Cash Value	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)	
	Beneficiary: Anne Shoop Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	nt.)	
	■ No					
	☐ Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

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			Document	Page 1	8 of 53		
Fill	in this inforn	nation to identify you	ur case:				
Deb	otor 1	Charles A. Sho	op. Jr.				
		First Name	Middle Name	Last Name		-	
	otor 2	Anne L. Shoop					
(Spo	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Ba	nkruptcy Court for the	: WESTERN DISTRICT OF PEN	NNSYLVANIA	\	_	
Cas	e number						
(if kn	own)					☐ Check	if this is an
						ameno	led filing
∩ff	icial Forn	106D					
		- H		_			
Sc	hedule	D: Creditors	Who Have Claims	Secure	d by Propert	У	12/15
s ne		Additional Page, fill it	If two married people are filing togeth out, number the entries, and attach it				
1. Do	any creditors	have claims secured b	y your property?				
	□ No. Check	this box and submit t	his form to the court with your other	r schedules. \	ou have nothing else	to report on this form.	
	Yes. Fill in	all of the information	below.				
Par	List A	II Secured Claims					
			more than one secured claim, list the cre	editor senaratel	Column A	Column B	Column C
for e	ach claim. If m	ore than one creditor has	s a particular claim, list the other creditor ical order according to the creditor's name	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Bank of A	merica	Describe the property that secures	the claim:	\$90,143.00	\$225,000.00	\$0.00
	Creditor's Name	е	120 Neshannick Trails New	Castle,			
			PA 16105 Lawrence County	·			
			*Fair Market Value determin current appraisal	led by			
	4000 0	O'I-	As of the date you file, the claim is:	Check all that			
	Tampa, F	arese Circle	apply.				
		, City, State & Zip Code	☐ Contingent				
	Number, Street	, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who	o owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only		☐ An agreement you made (such as	mortgage or se	ecured		
_	Debtor 2 only		car loan)				
	Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	At least one of t	he debtors and another	☐ Judgment lien from a lawsuit				
	Check if this cl community de	aim relates to a bt	Other (including a right to offset)	Mortgage			
		Opened 06/13 Last Active					

Date debt was incurred 3/29/19

Last 4 digits of account number

1000

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Debtor 1 Charles A			Case number (if known)		
First Name	Middle N	ame Last Name			
Debtor 2 Anne L. S	noop Middle N	ame Last Name			
			4	*	
2.2 Bank of Ameri	ica	Describe the property that secures the claim:	\$74,331.00	\$225,000.00	\$0.00
Oreditor 3 Name		120 Neshannick Trails New Castle, PA 16105 Lawrence County			
		*Fair Market Value determined by			
		current appraisal			
4909 Savarese	e Circle	As of the date you file, the claim is: Check all the apply.	at		
Tampa, FL 336	634	☐ Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated			
W		Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only			or secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2) h .		-1		
☐ At least one of the deb		☐ Statutory lien (such as tax lien, mechanic's lied☐ Judgment lien from a lawsuit	n)		
☐ Check if this claim re		5	l Mortgage		
community debt		— Other (including a right to onset)			
	Opened				
	07/15 Last				
	Active		00		
Date debt was incurred	3/19/19	Last 4 digits of account number 44	99		
Nissan Motor					
Acceptance		Describe the property that secures the claim:	\$28,696.00	\$26,325.00	\$2,371.00
Creditor's Name		2015 Nissan Frontier 32,000 miles			
		Location: 120 Neshannock Trails, New Castle PA 16105			
Pob 660366		As of the date you file, the claim is: Check all the	l at		
Dallas, TX 752	66	apply. Contingent			
Number, Street, City, S		☐ Contingent☐ Unliquidated			
riambor, carott, city, c	state a E.p code	Disputed			
Who owes the debt?	check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage of	or secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	•	Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the deb		☐ Judgment lien from a lawsuit			
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)	Obile		
	Opened				
	01/19 Last				
	Active		04		
Date debt was incurred	3/20/19	Last 4 digits of account number 00	<u> </u>		
Add the dollar value of	f vour entries in C	column A on this page. Write that number here:	\$193,170.	00	
If this is the last page	of your form, add	the dollar value totals from all pages.	\$193,170.		
Write that number her					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Debto	r 1	Charles A. Shoop), Jr.		Case number (if known)		
Debto	r 2	Anne L. Shoop First Name	Middle Name Middle Name	Last Name			
	Baı Att Po	ne, Number, Street, City, nk of America n: Bankruptcy Box 982238 Paso, TX 79998	State & Zip Code		On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number		
	Baı Att Po	ne, Number, Street, City, nk of America n: Bankruptcy NC Box 26012 eensboro, NC 274	4-105-02-77		On which line in Part 1 did you enter the creditor? 2.2 Last 4 digits of account number		
	Baı PO	ne, Number, Street, City, nk of America Cus Box 31785 mpa, FL 33631			On which line in Part 1 did you enter the creditor?		
	Nis Att Po	ne, Number, Street, City, ssan Motor Accept n: Bankruptcy De Box 660360 Ilas, TX 75266	tance		On which line in Part 1 did you enter the creditor?		

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Ous	C 10 2100 - 0/10	Document	Page 2	L of 53	.00 2000	IVICITI
Fill in this info	rmation to identify your ca					
Debtor 1	Charles A. Shoop,	Jr.				
	First Name	Middle Name	Last Name			
Debtor 2	Anne L. Shoop	Mill III M				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	WESTERN DISTRICT OF PE	NNSYLVANIA			
Case number					☐ Check if	f this is an
()					amende	
Official For Schedule I		no Have Unsecured	Claims			12/15
any executory con Schedule G: Exec Schedule D: Cred left. Attach the Co name and case nu	ntracts or unexpired leases the sutory Contracts and Unexpir- itors Who Have Claims Secur ontinuation Page to this page umber (if known).	Part 1 for creditors with PRIORI' nat could result in a claim. Also ed Leases (Official Form 106G). I red by Property. If more space is If you have no information to re	list executory o Do not include i needed, copy t	ontracts on Schedule A/B: Pro any creditors with partially sec he Part you need, fill it out, nu	perty (Official Form cured claims that are mber the entries in	n 106A/B) and on re listed in the boxes on the
	All of Your PRIORITY Uns					
	tors have priority unsecured	claims against you?				
No. Go to	Part 2.					
☐ Yes.	AU () NONDO DE T					
	All of Your NONPRIORITY					
3. Do any credi	tors have nonpriority unsecu	red claims against you?				
☐ No. You h	ave nothing to report in this par	t. Submit this form to the court with	your other sche	dules.		
Yes.						
unsecured cla	aim, list the creditor separately f	ms in the alphabetical order of the order of the order claim. For each claim listed the other creditors in Part 3.lf you	d, identify what t	pe of claim it is. Do not list claim	is already included in	n Part 1. If more
					Total	claim
4.1 Chase	Card Services	Last 4 digits of acc	ount number	4785		\$3,979.00
•	ity Creditor's Name x 15298			Opened 09/17 Last Ac	tive	
	ngton, DE 19850	When was the deb	t incurred?	12/31/18		
Number	Street City State Zip Code	As of the date you	file, the claim i	s: Check all that apply		
Who inc	urred the debt? Check one.					
Debto	or 1 only	☐ Contingent				
☐ Debto	or 2 only	☐ Unliquidated				
☐ Debto	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and anoth	<u> </u>	RITY unsecured	l claim:		
	k if this claim is for a comm					
debt Is the cla	aim subject to offset?	☐ Obligations arisi report as priority cla		ration agreement or divorce that	you did not	
■ No		☐ Debts to pension	n or profit-sharin	g plans, and other similar debts		
☐ Yes		Other. Specify	Credit Card			

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Citi/Sears	Last 4 digits of account number	5931	\$3,550.0		
Nonpriority Creditor's Name		Opened 07/98 Last Active			
Po Box 6283 Sioux Falls, SD 57117	When was the debt incurred?	1/31/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecure				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	Other. Specify Credit Card	<u> </u>			
Citicards Cbna	Last 4 digits of account number	1520	\$8,098.0		
Nonpriority Creditor's Name		Opened 08/14 Last Active			
Po Box 6217 Sioux Falls, SD 57117	When was the debt incurred?	5/03/18			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Credit Card	1			
Citizens Bank	Last 4 digits of account number	9494	\$18,321.0		
Nonpriority Creditor's Name		Opened 04/15 Last Active			
480 Jefferson Blvd Warwick, RI 02886	When was the debt incurred?	3/05/19			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Automobile				

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	2 Anne L. Shoop					
1.5	ComenityCapital/Boscov Nonpriority Creditor's Name	Last 4 digits of account number	2386	\$3,311.00		
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	Opened 11/92 Last Active 1/31/19			
	Number Street City State Zip Code Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
	Deptartment Store National					
1.6	Bank/Macy's	Last 4 digits of account number	<u>3659</u>	\$2,461.00		
	Nonpriority Creditor's Name Po Box 8218	When was the debt incurred?	Opened 09/92 Last Active 1/09/19			
	Mason, OH 45040 Number Street City State Zip Code	As of the date you file, the claim i	s. Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim				
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another					
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count			
.7	Discover Financial	Last 4 digits of account number	2793	\$14,346.00		
	Nonpriority Creditor's Name		Opened 12/17 Lest Active			
	Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 12/17 Last Active 3/01/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card				
	Is the claim subject to offset?					
	■ No					
	☐ Yes					

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Anne L. Shoop		Case number (if known)			
Elan Financial Service	Last 4 digits of account number	0205	\$6,794.0		
Nonpriority Creditor's Name		Opened 04/94 Last Active			
Po Box 108 Saint Louis, MO 63166	When was the debt incurred?	1/09/19			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify Credit Card	<u> </u>			
Jn Portfolio Debt Equities, LLC	Last 4 digits of account number	5897	\$29,771.0		
Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 Hazelwood, MO 63042	When was the debt incurred?	Opened 05/18			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
At least one of the debtors and another	Student loans	a ciaiii.			
☐ Check if this claim is for a community debt sthe claim subject to offset?	_	aration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□ Yes		Company Account Sofi Lending			
Portfolio Recovery	Last 4 digits of account number	3030	\$6,798.0		
Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 09/18			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□Yes	■ Other. Specify Factoring Company Account Citibank N.A.				

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	1 Charles A. Shoop, Jr. 2 Anne L. Shoop		Case number (if known)			
4.1	Synchrony Bank/ JC Penneys	Last 4 digits of account number	1180	\$3,672.00		
	Nonpriority Creditor's Name	_				
	Po Box 965007 Orlando, FL 32896	When was the debt incurred?	Opened 01/92 Last Active 1/31/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	,			
	■ No	Debts to pension or profit-sharin	• •			
	Yes	Other. Specify Charge Acc	count			
4.1	Synchrony Bank/Lowes	Last 4 digits of account number	9576	\$3,854.00		
	Nonpriority Creditor's Name Po Box 956005 Orlando, FL 32896	When was the debt incurred?	Opened 09/98 Last Active 1/16/19			
-	Number Street City State Zip Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community		□ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa				
	■ No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Charge Acc				
3	Synchrony Bank/QVC Nonpriority Creditor's Name	Last 4 digits of account number	7692	\$1,419.00		
	Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 05/02 Last Active 1/16/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify Charge Acc	count			

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Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop Case number (if known) 4.1 Synchrony Bank/Sams Club 9268 \$7,403.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/15 Last Active Po Box 965005 When was the debt incurred? 5/17/18 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Chase Card Services** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 15298 Wilmington, DE 19850 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Citi Simplicity Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6241 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citi/Sears Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Citibank/Centralized Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 790034 St Louis, MO 63179 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citibank NA Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 701 East 60th St. N Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57104-0432 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citicards Cbna Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Citi Bank Part 2: Creditors with Nonpriority Unsecured Claims Po Box 6077 Sioux Falls, SD 57117 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citizens Bank Line **4.4** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attention: ROP-15B Part 2: Creditors with Nonpriority Unsecured Claims 1 Citizens Drive Riverside, RI 02940 Last 4 digits of account number

ComenityCapital/Boscov

Name and Address

Official Form 106 E/F

Line 4.5 of (Check one):

On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop		Case number (if known)	
Attn: Bankruptcy Dept		☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 182125		Part 2: Creditors with Nonpriority Unsecured Claims	
Columbus, OH 43218	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
Deptartment Store National	Line 4.6 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Bank/Macy's		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Attn: Bankruptcy 9111 Duke Boulevard			
Mason, OH 45040			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die		
Discover Financial Attn: Bankruptcy Department	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Po Box 15316		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wilmington, DE 19850	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
Elan Financial Service	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Attn: Bankruptcy		■ Part 2: Creditors with Nonpriority Unsecured Claims	
4801 Frederica Street Owensboro, KY 42301			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
Jn Portfolio Debt Equities, LLC Attn: Bankruptcy	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
5757 Phantom Dr. Ste 225		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Hazelwood, MO 63042	Land delimite of a second records		
	Last 4 digits of account number		_
Name and Address Macy's	On which entry in Part 1 or Part 2 did Line 4.6 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 78008	Line 410 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims	
Phoenix, AZ 85062-8008	Last 4 digits of account number	Tate 2. Ground of married priority Ground Grains	
Name and Address		duran linkaka arinirah aradika 0	
Portfolio Recovery	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 41021		Part 2: Creditors with Nonpriority Unsecured Claims	
Norfolk, VA 23541	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
Portfolio Recovery Associates	Line 4.10 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
c/o PRA Receivables PO Box 12914		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Norfolk, VA 23541			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die		
Radius Gloval Solutions LLC formerly Northland Group LLC	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
PO Box 390905		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Minneapolis, MN 55439	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
S&T Bank	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Loan Servicing Center		Part 2: Creditors with Nonpriority Unsecured Claims	
P.O. Box 469 Indiana, PA 15701			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
S&T Bank Cardmember Service Line <u>4.8</u> of (Check one):			

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Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop		Case number (if known)
PO Box 790408 Saint Louis, MO 63179-0408		Part 1: Creditors with Priority Unsecured Claims
Jamit Louis, 1110 03 17 3-0400	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 d	
SoFi Lending Corp Personal Loans PO Box 654158	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Dallas, TX 75265		■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
SYNCB/Lowes	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 530914 Atlanta, GA 30353-0914		Part 2: Creditors with Nonpriority Unsecured Claims
Anama, 0A 30000 0014	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Synchrony Bank/ JC Penneys	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy		■ Part 2: Creditors with Nonpriority Unsecured Claims
Po Box 956060 Orlando, FL 32896		
Chando, i E 32030	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Synchrony Bank/Lowes	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy		■ Part 2: Creditors with Nonpriority Unsecured Claims
Po Box 965060 Orlando, FL 32896		
5.1d.1d5, 1 2 52555	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Synchrony Bank/QVC	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Dept Po Box 965060		■ Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Synchrony Bank/Sams Club	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Dept Po Box 965060		■ Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
United Collection Bureau Inc.	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
5620 Southwyck Blvd., Suite 206 Toledo, OH 43614		Part 2: Creditors with Nonpriority Unsecured Claims
. 5.545, 611 40014	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type	of Unsecured Claim	
Total the amounts of certain types of unsecured type of unsecured claim.	d claims. This information is for statist	tical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
Type C. S. Gooding Glamm		

				Total Claim	
	6a.	Domestic support obligations	6a.	\$ 0.00	
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00	
					\neg
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00	
				Total Claim	
	6f.	Student loans	6f.	\$ 0.00	
Total					

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Debtor 1 Charles A. Shoop, Jr.

Debtor 2 Anne L. Shoop Case number (if known)

claims from Part 2

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- Total Nonpriority. Add lines 6f through 6i.

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 113,777.00

6j. 113,777.00 Case 19-21894-JAD Doc 1 Filed 05/08/19 Entered 05/08/19 14:27:58 Desc Main Document Page 30 of 53

Fill in this infor	mation to identify your	case:		
Debtor 1	Charles A. Shoop	o, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Anne L. Shoop			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Lincoln Automotive Financial Service Pob 542000 Omaha, NE 68154	Acct# 55236691 Opened 08/17 Lease

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		Docume	ent Page 31 d	of 53	
Fill in this	information to identify yo	ur case:			
Debtor 1	Charles A. Sho	op, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Anne L. Shoop First Name	Middle Name	Last Name		
	o ,				
United Sta	tes Bankruptcy Court for the	: WESTERN DISTRICT	OF PENNSYLVANIA		
Case num	ber				
(if known)				_	neck if this is an
				an	nended filing
Officia	l Form 106H				
	lule H: Your Co	dobtors			40/45
Scried	iule II. Toul Co	uentoi 2			12/15
our name	and case number (if know	he boxes on the left. Attac (n). Answer every question (If you are filing a joint case,	1.	o this page. On the top of any Addi as a codebtor.	tional Pages, write
	, ,	3,			
■ No					
☐ Yes	3				
		rou lived in a community p na, Nevada, New Mexico, Po		y? (<i>Community property states and te</i> ngton, and Wisconsin.)	erritories include
	Go to line 3. S. Did your spouse, former spouse,	pouse, or legal equivalent liv	e with you at the time?		
in line Form	2 again as a codebtor onl	y if that person is a guaraı	ntor or cosigner. Make	if your spouse is filing with you. Li sure you have listed the creditor on 6G). Use Schedule D, Schedule E/F	Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZID Codo		Column 2: The creditor to who	n you owe the debt
	Name, Number, Street, Oity, State and	u ZIF Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	_
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	_
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	_
				Schedule G, line	
-	Number Street				
	City	State	ZIP Code		

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						-				
	in this information to identify your btor 1 Charles A.									
Del	btor 2 Anne L. Sh	-			_					
` '	ouse, if filing)									
Uni	ited States Bankruptcy Court for th	e: WESTERN DISTRICT	OF PENNSYLVANIA							
	se number nown)		-				heck if this is: I An amended filing			
						l <u>—</u>		ent showing po	ostpetition	chapter
_	(f) 1 . I . E					13	income a	as of the follow	ving date:	
	fficial Form 106l					MN	// DD/ Y	YYY		
S	chedule I: Your Ind	come								12/1
atta Pa	use. If you are separated and youch a separate sheet to this form It 1: Describe Employmen	. On the top of any addition								
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2	or non-filing	spouse	
	If you have more than one job,	Employment status	☐ Employed			I	☐ Employed			
	attach a separate page with information about additional	Employment status	■ Not employed			1	■ Not employed			
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
spo	imate monthly income as of the use unless you are separated.				•				·	
If yo	ou or your non-filing spouse have r re space, attach a separate sheet t	nore than one employer, co o this form.	mbine the information	for all e	emplo	oyers for th	nat perso	n on the lines	below. If y	you need
						For Debt	or 1	For Debtor		
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	0.00	

Official Form 106l Schedule I: Your Income page 1

0.00

0.00

Calculate gross Income. Add line 2 + line 3.

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Charles A. Shoop, Jr. Debtor 1 Debtor 2 Anne L. Shoop Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 0.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 Other deductions. Specify: 5h. 5h.+ 0.00 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 \$ 0.00 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$ 0.00 0.00 \$ 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 2,013.00 929.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ 0.00 Specify: 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 4,111.00 Other monthly income. Specify: 8h.+ \$ \$ 8h. 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 6,124.00 929.00 10. \$ \$ 10. Calculate monthly income. Add line 7 + line 9. 6,124.00 929.00 \$ 7,053.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 7,053.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain: Wife turns 65 here in the next few months. Her income will decrease by \$145.00 per month at that

Official Form 106I Schedule I: Your Income page 2

time.

Fill in	n this informa	tion to identify yo	our case:					
Debto	or 1	Charles A. S	Shoop, Jr.			Che	ck if this is: An amended filing	
Debto	or 2 use, if filing)	Anne L. Sho	ор				•	ving postpetition chapter the following date:
United	d States Bankr	uptcy Court for the	: WESTE	RN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
Case (If kno	number							
Off	ficial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/1
Be as infor num	s complete a mation. If m ber (if know	and accurate as ore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people ar ch another sheet to this				
Part 1.	1: Describe Description 1: Descripti	ibe Your House	ehold					
	□ No. Go to							
			in a senar	ate household?				
	■ N	0		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
0	D		=					
	•	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							□ Yes
								□ No
							_	Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do your exp	enses include		No				□ res
	expenses of	f people other to d your depende	han 👝	Yes				
				_				
expe	nate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the v		n assistance an		government assistance it sluded it on Schedule I: Y			Your exp	enses
,		,						
		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgag	e 4. S	.	2,225.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
		rty, homeowner's				4b. \$	·	0.00
		<u>.</u>	•	ipkeep expenses		4c. \$		175.00
		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. 5	·	0.00
٠.			y c			٥. ١	·	0.00

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Debtor	• *			
Debtor 2	Anne L. Shoop	Case num	nber (if known)	
6. Ut	lities:			
6. 6 1		6a.	\$	284.00
6b	•	6b.		216.00
6c	, , , , ,	6c.	· : ———	260.00
6d		6d.	·	51.00
	od and housekeeping supplies	— 7.	·	575.00
	ildcare and children's education costs	8.	\$	0.00
-	othing, laundry, and dry cleaning	9.	·	195.00
	rsonal care products and services	10.	·	90.00
	dical and dental expenses	11.	· ·	310.00
	ansportation. Include gas, maintenance, bus or train fare.		*	010.00
	not include car payments.	12.	\$	550.00
13. E n	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	120.00
14. Ch	aritable contributions and religious donations	14.	\$	80.00
-	surance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		_	
_	a. Life insurance	15a.	·	57.00
_	b. Health insurance	15b.	·	388.00
_	c. Vehicle insurance	15c.	· -	187.00
	d. Other insurance. Specify:	15d.	\$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	c	00.00
	ecify: IRS	16.	\$	30.00
	stallment or lease payments: a. Car payments for Vehicle 1	17a.	¢	420.00
	b. Car payments for Vehicle 2	17a. 17b.	· -	
	c. Other. Specify:	17b. 17c.	·	0.00
	d. Other. Specify:	176. 17d.	· ·	0.00
	ur payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	ducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	her payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
20. Ot	her real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
20	a. Mortgages on other property	20a.	\$	0.00
20	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
21. Ot	her: Specify: Tolls	21.	+\$	80.00
W	fe's Credit Cards		+\$	785.00
22 Co	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	7 079 00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	7,078.00
			·	7.070.00
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	7,078.00
23. C a	Iculate your monthly net income.			
23	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,053.00
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	7,078.00
23	c. Subtract your monthly expenses from your monthly income.	00 -	•	-25.00
	The result is your monthly net income.	23c.	\$	-23.00
24 -	way expect an increase or decrease in your expenses within the year offer w	ou filo 4hi	s form?	
	you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you			e or decrease because of a
	diffication to the terms of your mortgage?		,,	
	No.			
	Yes. Explain here:			

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Fill in this infor	mation to identify your	case:	
Debtor 1	Charles A. Shoop	, Jr.	
	First Name	Middle Name Last Name	
Debtor 2	Anne L. Shoop		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF PENNSYLVANIA	
Case number			
(if known)			☐ Check if this is an amended filing
two married power file the obtaining mone	eople are filing togethe	n Individual Debtor's Schedules both are equally responsible for supplying correct information bankruptcy schedules or amended schedules. Making a false connection with a bankruptcy case can result in fines up to \$25 and 3571.	statement, concealing property, or
Sig	n Below		
Did you pa	ay or agree to pay some	one who is NOT an attorney to help you fill out bankruptcy form	s?
■ No			
☐ Yes.	Name of person		Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	hat I have read the summary and schedules filed with this decla	aration and
	arles A. Shoop, Jr.	X /s/ Anne L. Shoop	
	es A. Shoop, Jr. ure of Debtor 1	Anne L. Shoop Signature of Debtor 2	
Date	April 17, 2019	Date April 17, 2019	

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Fill i	n this infor	nation to identify you	r case:					
Debt	or 1	Charles A. Shoo	p, Jr.					
		First Name	Middle Name		Last Name			
Debt (Spou	or 2 se if, filing)	Anne L. Shoop First Name	Middle Name		_ast Name			
Unite	ed States Ba	inkruptcy Court for the:	WESTERN DISTRICT (JF PENN	SYLVANIA			
Case (if kno	e number _ wn)						_	eck if this is an nended filing
Sta Be as	tement complete mation. If n	and accurate as possi	Affairs for Indivible. If two married people attach a separate sheet to	are filing	together, both are	equally responsible		
numk Part		n). Answer every que: Details About Your Ma	stion. arital Status and Where Yo	ou Lived I	3efore			
1. \	What is you	r current marital statu	ıs?					
	■ Married □ Not ma							
'	□ Notilia	mea						
2. I	During the I	ast 3 years, have you	lived anywhere other than	n where y	ou live now?			
	No							
I	☐ Yes. Lis	st all of the places you I	ived in the last 3 years. Do	not includ	e where you live now	<i>1</i> .		
	Debtor 1 P	rior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there
			ver live with a spouse or le					
states	s and territor	ies include Arizona, Ca	lifornia, Idaho, Louisiana, N	evada, N	ew Mexico, Puerto R	ico, rexas, vvasningto	on and wis	sconsin.)
ı	No							
l	☐ Yes. Ma	ake sure you fill out Scl	nedule H: Your Codebtors (Official Fo	rm 106H).			
Part	2 Expla	in the Sources of You	r Income					
-	Fill in the tot	al amount of income yo	nployment or from operat u received from all jobs and have income that you recei	l all busin	esses, including part-	time activities.	us calend	dar years?
i	_	I in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	es income are deductions and asions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)

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Debte	or 2 _ A	nne L. Sho	ор			Cas	se number (if known)		
lı a	nclude ir and other	come regard public bene	dless of whet fit payments	ther that income is ta ; pensions; rental inc	xable. Example come; interest;		alimony; child supp cted from lawsuits;	royalties;	l Security, unemployment and gambling and lottery
L	ist each	source and	the gross inc	come from each sour	ce separately.	Do not include income	that you listed in lir	ne 4.	
г	□ No								
Ì	_	Fill in the de	etails.						
				Debtor 1			Debtor 2		
				Sources of incon	ne G	ross income from	Sources of inc	ome	Gross income
				Describe below.	(b	ech source efore deductions and cclusions)	Describe below	'.	(before deductions and exclusions)
		ndar year: December	31, 2018)	Pension		\$59,457.00			
				Social Security	,	\$25,080.00	Social Secur	ity	\$10,836.00
		dar year be December		Capital Gain		\$234.00			
				Pension		\$59,458.00			
				Social Security	1	\$24,588.00	Social Secur	itv	\$8,860.00
_		During the No. Yes	e 90 days bef Go to line List below paid that c not include to adjustmen	7. each creditor to who reditor. Do not include payments to an atton on 4/01/22 and evo	kruptcy, did you om you paid a to de payments fo orney for this ba ery 3 years afte	u pay any creditor a total of \$6,825* or more r domestic support obligankruptcy case.	in one or more pay gations, such as ch	ments an	d the total amount you rt and alimony. Also, do ent.
	■ Yes			or both have prima fore you filed for bank	•	debts. u pay any creditor a tota	al of \$600 or more?	•	
		■ No. □ Yes	include pa	each creditor to who	support obligat	otal of \$600 or more an tions, such as child sup			that creditor. Do not ot include payments to an
	Creditor	's Name an	d Address	Dates	of payment	Total amount paid	Amount you still owe	Was th	is payment for
I. c	<i>nsiders</i> in the state of which y	nclude your ou are an o	relatives; any fficer, directo	y general partners; re or, person in control, o	elatives of any or owner of 209		erships of which yo g securities; and a	u are a ge ny manag	eneral partner; corporation ing agent, including one fo
ı	No								
	☐ Yes.	List all payr	ments to an i	nsider.					
	Insider's	Name and	Address	Dates	of payment	Total amount paid	Amount you still owe	Reasor	n for this payment
8. V	Within 1	year before	you filed fo	r bankruptcy, did y	ou make any p	payments or transfer a	any property on a	ccount of	a debt that benefited ar

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	otor 1 Charles A. Shoop, Jr. Anne L. Shoop	Doddinent	Cas	se number (if known)			
	insider? Include payments on debts guaranteed or cos	igned by an insider.					
	■ No						
	Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment	
		Dailes of Paymoni	paid	still owe	Include cred		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.						
	■ No □ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?	
	□ No. Go to line 11.						
	Yes. Fill in the information below.						
						Value of the	
	Creditor Name and Address	me and Address Describe the Property				Value of the property	
		Explain what happened					
	Citizens Bank 480 Jefferson Blvd	2015 Ford Explorer			September \$12,300 2018		
	Warwick, RI 02886	■ Property was reposs	hassa	2010	,		
		☐ Property was foreclosed					
		☐ Property was garnish					
		☐ Property was attache	ed, seized or levied.				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		cluding a bank or fi	nancial institutio	n, set off any a	amounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a	
	No						
	☐ Yes						
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gift	ts with a total value	of more than \$60	00 per person	?	
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600	Describe the gifts	.		s you gave	Value	
	per person			the g	JIITS		
	Person to Whom You Gave the Gift and						

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Deb	otor 2 Anne L. Shoop		Case no	umber (if known)	
14.	Within 2 years before you filed for bank No Yes. Fill in the details for each gift or		did you give any gifts or contributions with	a total value of more tha	n \$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankroor gambling?	uptcy o	r since you filed for bankruptcy, did you los	se anything because of th	eft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss e the amount that insurance has paid. List penince claims on line 33 of Schedule A/B: Proper		Value of property lost
Par	t 7: List Certain Payments or Transfer	rs			
	□ No ■ Yes. Fill in the details. Person Who Was Paid		rs, or credit counseling agencies for services re Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		transferred	or transfer was made	payment
	Steidl and Steinberg, P.C. Suite 2830 - Gulf Tower 707 Grant Street Pittsburgh, PA 15219			April 19, 2019	\$1,735.00
	Advantage Credit Counseling Servinc River Park Commons 2403 Sidney Street, Suite 400 Pittsburgh, PA 15203	vice,		April 1, 2019	\$24.95
17.	Within 1 year before you filed for bankry promised to help you deal with your cree Do not include any payment or transfer that	editors o		f pay or transfer any prop	perty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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	otor 2 Anne L. Shoop		C	ase number (if known)	
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers may include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	airs? the granting of a se		
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No ☐ Yes. Fill in the details.		y property to a se	lf-settled trust or similar device	of which you are a
	Name of trust	Description and v	alue of the prope	rty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	truments. Safe Denosit	Boxes, and Stora	age Units	
 20. Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass No Yes. Fill in the details. 		other financial accou	nts; certificates of		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account number instrument		or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	First National Bank 4140 East State Street Hermitage, PA 16148	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	Account was closed due to Fraud - January 2019 *Account was negative \$1,250.00	\$0.00
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	safe deposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit of ■ No □ Yes. Fill in the details.	r place other than your	home within 1 ye	ar before you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?

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Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop

Case number (if known)

Part	9: Identify Property You Hold or Control for	Someone Else						
	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Part	10: Give Details About Environmental Information	ation						
For t	he purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,				
Repo	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Part	11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)					
	☐ A partner in a partnership	, ,	,					
	☐ An officer, director, or managing execut	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Case 19-21894-JAD Doc 1 Filed 05/08/19 Entered 05/08/19 14:27:58 Desc Main Page 43 of 53 Document Debtor 1 Charles A. Shoop, Jr. Debtor 2 Anne L. Shoop Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charles A. Shoop, Jr. /s/ Anne L. Shoop Anne L. Shoop Charles A. Shoop, Jr. Signature of Debtor 1 Signature of Debtor 2 Date April 17, 2019 Date April 17, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes

■ No

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Fill in this inform	nation to identify your case:		
Debtor 1	Charles A. Shoop, Jr.		
	First Name Middle Name	Last Name	
Debtor 2	Anne L. Shoop		
Spouse if, filing)	First Name Middle Name	Last Name	
United States Bar	nkruptcy Court for the: WESTERN DIS	TRICT OF PENNSYLVANIA	
Case number			
(if known)			Check if this is an amended filing
Official For		viduals Filing Under Chapter	7 12/15
creditors have you have lease ou must file this		not expired. er you file your bankruptcy petition or by the date set f	
on the f	orm	he time for cause. You must also send copies to the c	·
	ople are filing together in a joint case, but date the form.	oth are equally responsible for supplying correct info	rmation. Both debtors must
	nd accurate as possible. If more space our name and case number (if known).	is needed, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List Yo	ur Creditors Who Have Secured Claims		
. For any credito		D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule Ca
Creditor's B a	ank of America	☐ Surrender the property.	□ No
name:		☐ Retain the property and redeem it.	_
Description of	120 Neshannick Trails New	Retain the property and enter into a	Yes
property	Castle, PA 16105 Lawrence	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	County *Fair Market Value determined		
	by current appraisal	Retain & Pay	
One ditente			
Creditor's B aname:	ank of America	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
name.		☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of	120 Neshannick Trails New	Reaffirmation Agreement.	 103
property	Castle, PA 16105 Lawrence County	■ Retain the property and [explain]:	
securing debt:	*Fair Market Value determined by current appraisal	Retain & Pay	
Creditor's Ni	issan Motor Acceptance	☐ Surrender the property.	■ No

Official Form 108

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		s A. Shoop, Jr. Shoop	Case number (if	known)
r	name:		☐ Retain the property and redeem it.	☐ Yes
ŗ	oroperty r securina debt:	2015 Nissan Frontier 32,000 miles Location: 120 Neshannock Frails, New Castle PA 16105	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	
or n tł	any unexpired placed information be	pelow. Do not list real estate leases.	es ed in Schedule G: Executory Contracts and Une Unexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
De	scribe your une	xpired personal property leases		Will the lease be assumed?
Les	ssor's name:	Lincoln Automotive Financia	al Service	□ No ■ Yes
Pro	scription of lease operty:	Opened 08/17 Lease		— 165
Pai	rt 3: Sign Belo	ow		
		erjury, I declare that I have indicated oject to an unexpired lease.	my intention about any property of my estate th	nat secures a debt and any personal
X	/s/ Charles A	A. Shoop, Jr.	X /s/ Anne L. Shoop	
-	Charles A. S Signature of De	Shoop, Jr.	Anne L. Shoop Signature of Debtor 2	
	Date Apr	il 17, 2019	Date April 17, 2019	

Fill in this info	ormation to identify your case:				irected in	this form and ir	n Form
Debtor 1	Charles A. Shoop, Jr.		122A-1Supp	:			
Debtor 2 (Spouse, if filing)	Anne L. Shoop		■ 1. The	e is no pres	umption o	f abuse	
United States	Bankruptcy Court for the: Western District of	f Pennsylvania	арр		nade unde	ne if a presump er <i>Chapter 7 Me</i> 122A-2)	
Case number (if known)	·		☐ 3. The	Means Test	does not	apply now beca	
	_			k if this is a		• • • • • • • • • • • • • • • • • • • •	<u>,</u>
Official F	Form 122A - 1					3	
	7 Statement of Your Cur	rent Monthly I	ncome				12/1
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people a te sheet to this form. Include the line number to w f known). If you believe that you are exempted from ary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	which the additional information a presumption of abuse be the street that the street that th	on applies. Or cause you do	the top of a not have pri	ny addition marily cons	al pages, write sumer debts or b	your name and because of
	your marital and filing status? Check one or married. Fill out Column A, lines 2-11.	nly.					
_		it both Columns A and D I	noo 0 11				
	ied and your spouse is filing with you. Fill oા ied and your spouse is NOT filing with you.						
	ving in the same household and are not lega			and R lines	2-11		
□ Liv	ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are leading apart for reasons that do not include evadir	out Column A, lines 2-11; degally separated under non	o not fill out C bankruptcy la	olumn B. By w that appli	checking		
101(10A). For the 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the total n the same rental property, put the income from that p	nonth period would be March 1 by 6. Fill in the result. Do not in	through August nclude any inco	31. If the amo	ount of your ore than on	monthly income ce. For example,	varied during , if both
			Column Debtor 1		Column Debtor non-fili		
	oss wages, salary, tips, bonuses, overtime, leductions).	and commissions (before	all \$	0.00	\$	0.00	
	y and maintenance payments. Do not include B is filled in.	payments from a spouse if	\$	0.00	\$	0.00	
of you of from an and roor filled in.	unts from any source which are regularly pa or your dependents, including child support, unmarried partner, members of your household mmates. Include regular contributions from a sp Do not include payments you listed on line 3. ome from operating a business, profession,	Include regular contribution, your dependents, parents ouse only if Column B is no	ns s,	0.00	\$	0.00	
5. Net inco	mie irom operating a business, profession,	Debtor 1					
Gross re	eceipts (before all deductions)	\$ 0.00					
Ordinary	and necessary operating expenses	-\$ 0.00					
	athly income from a business, profession, or far	m \$0.00 Copy here	e -> \$	0.00	\$	0.00	
6. Net inco	ome from rental and other real property	Debtor 1					
Gross re	eceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
•	othly income from rental or other real property	\$ 0.00 Copy here	e -> \$	0.00	\$	0.00	
7 Interest	dividends and royalties		\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

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	narles A. Shoop, Jr. nne L. Shoop		_	Case n	umber (if known)			
				Colum Debto		Column B Debtor 2 o	=	
Unempl	loyment compensation			\$	0.00	\$	0.00	
	enter the amount if you contend that the ial Security Act. Instead, list it here:	ne amount received was	a benefit un	der				
	ou		0.00					
For yo	our spouse	\$	0.00					
Pension benefit u Income	 or retirement income. Do not inclu under the Social Security Act. from all other sources not listed al 	de any amount received bove. Specify the source	and amoun	\$ t.	4,111.00	\$	0.00	
received domestic	nclude any benefits received under the das a victim of a war crime, a crime a c terrorism. If necessary, list other so	gainst humanity, or interr	national or)				
total bel				\$	0.00	\$	0.00	
•				\$ 	0.00	\$ 	0.00	
	Total amounts from separate pages,	if any			0.00	\$	0.00	
	rotal amounts from separate pages,	ii arry.		+ *		Ψ	0.00	
	te your total current monthly incon lumn. Then add the total for Column A			4,111.0	90 + 5 _	0.00	= \$	4,111.(
	te your current monthly income for py your total current monthly income	•	•		Copy line 11	here=>	\$	4,111.0
Mu	Iltiply by 12 (the number of months in	a year)					X	12
12b. The	e result is your annual income for this	part of the form				12b	. \$	49,332.0
Calcula	te the median family income that a	pplies to you. Follow the	ese steps:					
Fill in the	e state in which you live.	PA						
Fill in the	e number of people in your household	d. 2						
								00 040 6
To find a	e median family income for your state a list of applicable median income am orm. This list may also be available a	ounts, go online using th		ed in the se	eparate instruc	tions 13.	\$	66,649.0
How do	the lines compare?							
14a. I	Line 12b is less than or equal to Go to Part 3.	line 13. On the top of pag	ge 1, check l	oox 1, Ther	e is no presur	nption of abus	e.	
14b. i	Line 12b is more than line 13. Or Go to Part 3 and fill out Form 12:		k box 2, The	presumption	on of abuse is	determined by	y Form 1	22A-2.
3: S	Sign Below							
	signing here, I declare under penalty	of perjury that the inform	ation on this	statement	and in any att	achments is tr	ue and c	orrect.
Ву					-			
	lol Charles A. Shaara Ir		V /-/ A	nna I Ol-				
X /	/s/ Charles A. Shoop, Jr. Charles A. Shoop, Jr. Signature of Debtor 1		Anne	nne L. Sh	p			
X //			Anne	L. Shoo ture of Deb	p tor 2			

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-21894-JAD Doc 1 Filed 05/08/19 Entered 05/08/19 14:27:58 Desc Main Document Page 52 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	Charles A. Shoop, Jr. Anne L. Shoop		Case No).			
	Allie L. Gloop	Debtor(s)	Chapter				
	DISCLOSURE OF COMPI	ENSATION OF ATTO	ORNEY FOR I	DEBTOR(S)			
(arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that impensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,400.00			
	Prior to the filing of this statement I have received	d	\$	1,400.00			
	Balance Due			0.00			
2. 5	\$_335.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed com	npensation with any other perso	on unless they are me	embers and associates	of my law firm.		
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				law firm. A		
6.	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
ŀ	 a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] One meeting and analysis of your final at one Section 341 Meeting, and normal 	atement of affairs and plan white itors and confirmation hearing, ncial problem, preparation	ch may be required; and any adjourned h and filing of the	earings thereof;	n, attendance		
7. 1	By agreement with the debtor(s), the above-disclosed for Services in addition to the ones outline P.C. Examples of additional work that limited to; amendments to bankruptcy the failure of the client to disclose or comotions for relief from stay, objections court hearings other than the originally	ed above may be billed sep would require payment of schedules, adversary prod correct information contain s to discharge, reaffirmatio	parately at the dis additional fees ar ceedings, lien avo ed in the bankru on agreements, ar	nd costs include, b pidances, any work ptcy petition, respo	ut are not related to enses to		
		CERTIFICATION					
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	any agreement or arrangement f	or payment to me fo	r representation of the	debtor(s) in		
Α	April 17, 2019	/s/ Kenneth Ste	idl				
	Date	Kenneth Steidl					
		Signature of Attorn Steidl & Steinbe					
		28th Floor - Gul					
		707 Grant Stree					
		Pittsburgh, PA 412-391-8000 F	15219-1908 Fax: 412-391-0221				
			ax. 412-391-0221 @steidl-steinber				

Name of law firm

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United States Bankruptcy Court Western District of Pennsylvania

In re	Charles A. Shoop, Jr. Anne L. Shoop		Case No.							
	·	Debtor(s)	Chapter	7						
VERIFICATION OF CREDITOR MATRIX The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.										
Date:	April 17, 2019	/s/ Charles A. Shoop, Jr. Charles A. Shoop, Jr. Signature of Debtor								
Date:	April 17, 2019	/s/ Anne L. Shoop								

Signature of Debtor